REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/066,147
	Filing Date	10/26/2001
	First Named Inventor	Hung T. Nguyen
	Art Unit	2181
	Examiner Name	Tonia L. Meonske
	Attorney Docket Number	01-626

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☑ I hereby appoint the practitioners associated with the Customer Number: 27964

☐ Please change the correspondence address for the above-identified application to:

☑ The address associated with Customer Number: 27964

OR

| ☐ Firm *or* Individual Name | |
| Address | |

City		State		Zip	
Country	
Telephone		Email	

I am the:

☐ Applicant/Inventor.

☑ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record		
Signature	[signature]	
Name	Prasad Kalluri	
Date	12│19│06	Telephone	214-454-8793

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☑ *Total of 1 forms are submitted.